

Form PTO-1594
(Rev. 10/02)
OMB No. 0651-0027 (exp. 6/30/2005)
Tab settings ⇨ ⇨ ⇨ ▼ ▼ ▼ ▼ ▼ ▼ ▼

RECORDATION FORM COVER SHEET TRADEMARKS ONLY

U.S. DEPARTMENT OF COMMERCE
U.S. Patent and Trademark Office

To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):

Insurance.com Insurance Agency, LLC

- Individual(s)
- General Partnership
- Corporation-State
- Other Limited Liability Company - Utah
- Association
- Limited Partnership

Additional name(s) of conveying party(ies) attached? Yes No

3. Nature of conveyance:

- Assignment
- Security Agreement
- Other _____
- Merger
- Change of Name

Execution Date: 07/17/2003

2. Name and address of receiving party(ies)

Name: ComparisonMarket, Inc.

Internal Address: Suite A

Street Address: 29001 Solon Road

City: Solon State: OH Zip: 44139

- Individual(s) citizenship _____
- Association _____
- General Partnership _____
- Limited Partnership _____
- Corporation-State Delaware
- Other _____

If assignee is not domiciled in the United States, a domestic representative designation is attached: Yes No
(Designations must be a separate document from assignment)
Additional name(s) & address(es) attached? Yes No

4. Application number(s) or registration number(s):

A. Trademark Application No.(s) _____
78/101752 and 76/131483

B. Trademark Registration No.(s) _____

Additional number(s) attached Yes No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: Pamela J. Cyngier

Internal Address: Jones Day

Street Address: North Point

901 Lakeside Avenue

City: Cleveland State: OH Zip: 44114

6. Total number of applications and registrations involved: _____

2

7. Total fee (37 CFR 3.41).....\$ 65.00

- Enclosed
- Authorized to be charged to deposit account

8. Deposit account number:

50-1432 (Account 192822615003)

DO NOT USE THIS SPACE

9. Signature.

Pamela J. Cyngier
Name of Person Signing


Signature

10/13/2003

Date


4

Total number of pages including cover sheet, attachments, and document:

Mail documents to be recorded with required cover sheet information to:
Commissioner of Patent & Trademarks, Box Assignments
Washington, D.C. 20231

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| Form PTO-1594 (Rev. 10/02) OMB No. 0651-0027 (exp. 6/30/2005) Tab settings $\Rightarrow \Rightarrow \Rightarrow$ | | RECORDATION FORM COVER SHEET TRADEMARKS ONLY | | U.S. DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office | |
| To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof. | | | | | |
| 1. Name of conveying party(ies): <u>Insurance.com Insurance Agency, LLC</u> | | | 2. Name and address of receiving party(ies) Name: <u>ComparisonMarket, Inc.</u> Internal Address: <u>Suite A</u> Street Address: <u>29001 Solon Road</u> City: <u>Solon</u> State: <u>OH</u> Zip: <u>44139</u> | | |
| <input type="checkbox"/> Individual(s) <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input type="checkbox"/> Corporation-State <input checked="" type="checkbox"/> Other <u>Limited Liability Company - Utah</u> | | | <input type="checkbox"/> Individual(s) citizenship <input type="checkbox"/> Association <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Partnership <input checked="" type="checkbox"/> Corporation-State <u>Delaware</u> <input type="checkbox"/> Other | | |
| Additional name(s) of conveying party(ies) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | If assignee is not domiciled in the United States, a domestic representative designation is attached: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Designations must be a separate document from assignment) Additional name(s) & address(es) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| 3. Nature of conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other | | | Execution Date: <u>07/17/2003</u> | | |
| 4. Application number(s) or registration number(s): A. Trademark Application No.(s) <u>78/101752 and 76/131482</u> | | | B. Trademark Registration No.(s) | | |
| Additional number(s) attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | | |
| 5. Name and address of party to whom correspondence concerning document should be mailed: Name: <u>Pamela J. Cyngier</u> Internal Address: <u>Jones Day</u> Street Address: <u>North Point</u> <u>901 Lakeside Avenue</u> City: <u>Cleveland</u> State: <u>OH</u> Zip: <u>44114</u> | | | 6. Total number of applications and registrations involved: 2 | | |
| | | | 7. Total fee (37 CFR 3.41).....\$ <u>65.00</u> <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to be charged to deposit account | | |
| | | | 8. Deposit account number: <u>50-1432 (Account 102822615003)</u> | | |
| DO NOT USE THIS SPACE | | | | | |
| 9. Signature. | | | | | |
| <u>Pamela J. Cyngier</u> Name of Person Signing | |  Signature | | <u>10/13/2003</u> Date | |
| Total number of pages including cover sheet, attachments, and document: 4 | | | | | |

Mail documents to be recorded with required cover sheet information to:
Commissioner of Patent & Trademarks, Box Assignments
Washington, D.C. 20231

CPI 465.00 501432 78101752

ASSIGNMENT OF MARKS

WHEREAS, Insurance.com Insurance Agency, LLC, a Utah limited liability company located at 1320 Centre Street, Suite 401, Newton, Massachusetts 02459, USA ("Assignor"), is the owner of the following applications and registration and the marks which they cover:

1. Australian Application No. 901,614 for INSURANCE.COM (and design);
2. Canadian Application No. 1,095,213 for INSURANCE.COM (and design);
3. European Community Registration No. 2,123,495 for INSURANCE.COM (and design)
4. United States Application Serial No. 78/101,752 for INSURANCE.COM; and
5. United States Application Serial No. 76/131,483 for INSURANCE.COM (and design); and

WHEREAS, ComparisonMarket, Inc., a Delaware corporation located at 29001 Solon Road, Suite A, Solon, Ohio 44139, USA ("Assignee"), wishes to acquire said marks together with the good will of the business with which said marks are used and which is symbolized by said marks and any and all registrations and applications for registration of said marks;

NOW, THEREFORE, for good and valuable consideration, Assignor hereby assigns to Assignee the entire right, title and interest in and to said marks, all registrations of and applications to register said marks, including the applications and registration listed above, the right to recover for past, present and future infringement or unauthorized use of said marks, and the good will of the business in connection with which said marks are used and which is symbolized by said marks.

Assignor requests the Commissioner of Patents & Trademarks to record Assignee as the registrant and owner of the Marks. Assignor shall provide Assignee cooperation and assistance at Assignee's request and expense in the implementation or perfection of this Assignment.

IN WITNESS WHEREOF, Assignor and Assignee have caused this Assignment to be duly executed as of the 17 day of July, 2003.

ASSIGNOR:

INSURANCE.COM, INSURANCE
AGENCY, LLC

By: Louis Geremia, Jr.
Title: President

ASSIGNEE:

COMPARISONMARKET, INC.


By: Dave Roush
Title: Chief Executive Officer

IN WITNESS WHEREOF, Assignor and Assignee have caused this Assignment to be duly executed as of the 17 day of July, 2003.

ASSIGNOR:

INSURANCE.COM, INSURANCE AGENCY, LLC



By: Louis Geremia, Jr.
Title: President

ASSIGNEE:

COMPARISONMARKET, INC.

By: Dave Roush
Title: Chief Executive Officer